## PATENT APPLICATION FEED ERMINATION RECORD Effective October 1, 2003

| Ap. | or Docket Number |
|-----|------------------|
|     |                  |

10/511060

| CLAIMS AS FILED - PART I  |  |               |                                      |                            |                    |                   |               | 0/91         | 7000                |                    |  |
|---|--|---------------|--------------------------------------|----------------------------|--------------------|-------------------|---------------|--------------|---------------------|--------------------|--|
|   | <u> </u>                                       |               | (Column 1) (Column 2)                |                            |                    | SMALL ENTITY TYPE |               |              | OTHER THAN          |                    |  |
| TOTAL CLAIMS  |  |               |                                      |                            |                    |                   |               |              | DE SMA              | LL ENTITY          |  |
| FOR   | Lih  | NUME          | BER FILED                            | NUMBER                     | ARTX3 R3BMI        |                   | HATE FEE      |              | RAT                 |                    |  |
| TOTAL CHAI  | RGEABLE CLAIM                                  |               | minus 20=                            |                            |                    | SKULLE .          |               |              | BASIC F             | PE 95              |  |
| NDEPENDEI   | NT CLAIMS                                      | 1             |                                      |                            |                    | XS                | 9=            | c            | R XS18              | =                  |  |
| AULTIPLE DEPENDENT CLAIM PRESENT  |  |               |                                      | <del></del>                |                    | X4                | 3=            |              | R X86=              |                    |  |
| <del> </del>  | · · · · · · · · · · · · · · · · · · ·          |               |                                      |                            |                    | -14               | 5=            |              | 200                 | <del></del>        |  |
| If the differe  | ence in column 1                               | is less than  | ess than zero, enter "0" in column 2 |                            |                    | TOT               | AI            |              | R -290=             | 1 - 1 -            |  |
| CLAIMS AS AMENDED - PART II   |  |               |                                      |                            |                    |                   | ~ L           |              | R TOTAL             | <del>/ / / /</del> |  |
| <del></del>   | (Column 1                                      |               | (Column 2) (Column 3)                |                            |                    |                   | LL ENTIT      | Y O          | OTHE<br>SMAL        | H THAN<br>L ENTITY |  |
| •   | REMAINING<br>AFTER                             |               | HIGHEST<br>NUMBER                    | PR                         | ESENT              |                   | ADD           |              |                     | ADDI-              |  |
| <u> </u>  | AMENDMEN'                                      | г             | PREVIOUS!<br>PAID FOR                | LY E                       | XTRA               | RAT               | E TION<br>FEE |              | RATE                | TIONAL             |  |
| Total   | •  | Minus         | **                                   | =                          |                    | XS 9              |               |              | XS18=               | FEE                |  |
| Independe   | L L  | Minus         | ***                                  | =                          |                    | X43:              |               | -\OF         | ` <del> </del>      | -                  |  |
| THIRST PHI  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |               |                                      |                            |                    |                   | -             | FOF          | X86=                |                    |  |
|   | •  |               |                                      |                            |                    | +145              | =             | OR           | +290=               | ·                  |  |
|   |  |               |                                      |                            |                    | TOT<br>ADDIT. F   | AL E          | OR           | TOTAL<br>ADDIT. FEL |                    |  |
| T   | (Column 1)<br>CLAIMS                           | <del></del>   | (Column 2)                           | (Colu                      | ımn 3)             |                   |               |              | AUDIT. PER          |                    |  |
|   | REMAINING<br>AFTER                             |               | NUMBER                               |                            | SENT               | 247               | ADDI-         |              |                     | ADDI-              |  |
| 7   | AMENDMENT                                      |               | PREVIOUSLY<br>PAID FOR               | EX                         | TRA                | RATE              | TIONA<br>FEE  | -            | RATE                | TIONAL<br>FEE      |  |
| Total   | *  | Minus         | 44 .                                 | =                          |                    | X\$ 9=            |               | OR.          | X\$18=              | - ree              |  |
| Inoependen  | 1  | Minus         | ***                                  | =                          |                    | X43=              |               | -            |                     |                    |  |
| J. WOTT TIE.  | SENTATION OF M                                 | JLTIPLE DE    | PENDENT CLAI                         | M [                        |                    | 743=              | ┼             | OR           | X86=                |                    |  |
|   |  |               |                                      | -                          |                    | +145=             | L             | OR           | +290=               |                    |  |
|   |  |               |                                      |                            |                    | ADDIT FE          |               | OR           | TOTAL               |                    |  |
|   | (Column 1)                                     |               | (Column 2)                           | (Colur                     | nn 3).             |                   |               | <b>-</b> . , | WOII. FEE           |                    |  |
|   | REMAINING AFTER                                |               | HIGHEST<br>NUMBER                    | PRES                       | ENT                |                   | ADDI-         | 7 [          |                     | ADDI-              |  |
| T   | AMENDMENT                                      |               | PREVIOUSLY<br>PAID FOR               | EXT                        | RA                 | RATE              | TIONAL<br>FEE | 1 1          | RATE                | TIONAL             |  |
| Total   | •  | Minus         | ••                                   | =                          |                    | X\$ 9=            |               | 1            | VC40                | FEE                |  |
| Independent   | •  | Minus         | ***                                  | =                          |                    |                   | ·             | OR           | X\$18=              |                    |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |               |                                      |                            |                    | X43=              |               | OR           | X86=                |                    |  |
| the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |               |                                      |                            |                    | +145=             |               | OR           | +290=               |                    |  |
| the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." he "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." he "Highest Number Previously Paid For" (Total or Independent) is the highest number of the paid For". |  |               |                                      |                            |                    | TOTAL<br>ODIT FEE |               |              | TOTAL               |                    |  |
| ne Highest Nui  | mber Préviously Paid                           | For (Total or | Independent) is the                  | an 3, enter<br>e highest n | "3."<br>lumber fou | ed in the ap      | Propriate box | Al           | DDIT. FEE L         |                    |  |
| 710-875 IRev 1  | 0.00;  |               | ·                                    |                            |                    |                   |               | COO!         |                     | 1                  |  |